COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHFR030045 US

As a below named inventor, I hereby declare that:						
My residence, post office address and citizenship are as stated next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: System for copy protection of an information carrier. the specification of which (check only one item below):						
is attached hereto.	☐ is attached hereto.					
☐ was filed as United States a	was filed as United States application					
Serial No						
on ————						
and was amended						
on						
☑ was filed as PCT international application						
Number PCT/IB2004/0)01255					
on <u>16 APRIL 200</u>)4					
l DOT	Austinia 40					
and was amended under PCT						
on		·	(if applicable).			
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.						
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).						
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:						
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:						
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119			
EUROPE	03300009.2	29 April 2003	YES			

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications) Attorneys Docket Number PHFR030045 US							
POWE	ER OF ATTORNE	Y: As a named inventor,	, I hereby appoint	t the following attorney(s) and/o therewith. (List name and regis			
Micha	E. Haken, Reg. No ael E. Marion, Reg rd M. Blocker, Re	g. No. 32, 266			Direct Telephor (name and tele (914)332-02	phone number)	
	FULL NAME OF INVENTOR	FAMILY NAME KURT		FIRST GIVEN NAME Ralph		ECOND GIVEN NAME	
201 RESIDENCE & CITY CITIZENSHIP Eindhoven			STATE OR FOREIGN COUNTRY The Netherlands		COUNTRY OF CITIZENSHIP Germany		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		CITY 5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands	
	FULL NAME OF INVENTOR	FAMILY NAME HENDRIKS		FIRST GIVEN NAME Robert		SECOND GIVEN NAME Frans Maria	
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COUNThe Netherlands		OUNTRY OF CITIZENSHIP The Netherlands	
	POST OFFICE ADDRESS	POST OFFICE ADDRE		CITY 5656 AA Eindhoven		TATE & ZIP CODE/COUNTRY The Netherlands	
- C	FULL NAME OF INVENTOR	FAMILY NAME BAKKER		FIRST GIVEN NAME Levinus	F	ECOND GIVEN NAME	
203	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COUNTHE Netherlands	i '	OUNTRY OF CITIZENSHIP The Netherlands	
	POST OFFICE ADDRESS	POST OFFICE ADDRE	ESS	CITY 5656 AA Eindhoven	1 -	TATE & ZIP CODE/COUNTRY The Netherlands	
to be to	true: and further that	t these statements were runder section 1001 if Title	made with the kno	owledge that willful false statem	ents and the like	ormation and belief are believed so made are punishable by fine ents may jeopardize the validity of	
SIGNA	Ralph Ku		SIGNATURE OF	F INVENTOR 202	SIGNATU	JRE OF INVENTOR 203	

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DATE

10 JUNE 2005

(July 1994)

DATE

10 JUNE 2005

DATE

20 JUNE 2005

PTC/SB/80 (11-04)
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I hereby 37 CFR	/ revoke all p 3.73(b).	previous powers of attorney	given in the applic	ation identified	I in the attached sta	tement under
	appoint:	· · · · · · · · · · · · · · · · · · ·				
			247	37		
OR			L			
Pra	ctitioner(s) nam	ned below (if more than ten patent	practitioners are to be	named, then a cus	stomer number must be u	.sed):
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		to represent the undersigned before ations assigned only to the undersign cordance with 37 CFR 3.73(b).	ore the United States P gned according to the I	atent and Tradema JSPTO assignmer	ark Office (USPTO) in co it records or assignment	nnection with documents
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A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee,						
and must	identify the	application in which this Pov	wer of Attorney is t	s authorized to o be filed.	act on benair of the	assignee,
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee						
Signature				rv 2005		
Name	Michael B Waying			333-9637		
Title	Author	ized Representat	ive		()21)	333 3037

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STAT	EMENT UNDER 37 CARACTER UT OF TO
Applicant/Patent Owner: Koninklijke Philips Electron	nics N.V.
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently
Entitled: SYSTEM FOR COPY PROTECTION OF	AN INFORMATION CARRIER
Koninklijke Philips Electronics N.V. (Name of Assignee)	, a <u>corporation</u> (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. ☑ the assignee of the entire right, title, and in	
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The undersigned (whose title is supplied below) i $(o \cdot 26 \circ 9)$	is authorized to act on behalf of the assignee. Michael E. Belk, Reg. 33,357
Date	Typed or printed name
(914) 333-9643	Moloce Kan
Telephone number	Signature
	Corporate Counsel Title

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